

Medicare finalizes decision to cover CT lung cancer screening

By ACSH Staff — February 9, 2015



Following the release of a preliminary plan by the Centers for

Medicare and Medicaid Services (CMS) last November, the agency has officially finalized their decision to cover annual low-dose CT screening for lung cancer.

One pack-year of smoking means that the smoker has a history of smoking one pack per day (ppd) for one year; if someone has smoked two ppd for 25 years, that would be 2 times 25, or 50 pack-years. As [announced previously](#) ^[1], CMS will cover CT screening for individuals who have at least a 30 pack-year history of smoking and who are either current smokers or have quit in the last 15 years. This comes with a caveat beneficiaries undergoing this screening will need a written order that can only be obtained during a lung cancer screening counseling and shared decision-making visit from a physician, physician assistant, nurse practitioner or clinical nurse specialist. Counseling sessions must also emphasize smoking cessation and continued abstinence for smokers and those who have quit smoking, respectively. Facilities conducting these tests must submit data on patients to a registry including the CT dosage, patient's smoking status and history and screening results.

[According to](#) ^[2] Patrick Conway, chief medical officer and deputy administrator for innovation and quality for CMS, We believe this final decision strikes an appropriate balance between providing access to this important preventive service and ensuring, to the best extent possible, that Medicare beneficiaries receive maximum benefit from a lung cancer screening program.

The most notable change in recommended coverage is that CMS will now cover the screening for those ages 55 to 77, as opposed to the original upper limit of 74. According to a survey of MedPage Today readers, many believe that there should be no upper limit.

CMS's advisory panel does not support this screening, citing concerns including: a high-false positive rate; the possibility of those not defined as high-risk seeking this screening; low quality scans due to low radiation dose and inconsistencies in interpreting results. However, [as we've said before](#) ^[1], the science supports this screening.

ACSH's Dr. Gilbert Ross explains, Although we have discussed the risks of routine screenings for

certain cancers annual mammograms for women starting at age 40, PSA testing we believe the evidence clearly shows that increased coverage and use of spiral, low-dose CT scans for high-risk patients [will save many lives](#) ^[3]from the terrible toll of lung cancer as a result of cigarette smoking. We fully support CMS's decision to cover these screenings for their high-risk beneficiaries.

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[1] <http://acsh.org/2014/11/medicare-will-cover-ct-lung-screening-high-risk-individuals/>

[2] <http://blogs.rollcall.com/healthopolis/medicare-will-cover-limited-lung-cancer-screening/?dcz=>

[3] <http://acsh.org/2013/05/spiral-ct-screening-a-good-idea-for-smokers-and-many-ex-smokers/>